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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Annipoliar or Duck children of To (		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR			NUMBE	RFILED	NUMBE	NUMBER EXTRA		RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))					<del>-</del> ·				s	OR		s
TOTAL CLAIMS (37 CFR 1.16(c))				minus 20		1.		x s =			<del></del>	,
INDEPENDENT CLAIMS						1.				Of:	X S =	
(37 CFR 1.16(b))				minus 3	<u>- 1 '</u>	1		X S =	<del></del>	OR	X \$ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							ļ	+ s==		OR	+ 5 =	
If the difference in column 1 is less than zero, enter 10 in column 2.								JATOF	L	Úk	TOTAL	
CEMINS AS AMERICAS FARMS												
	9-9-				(Column 2)	(Column 3)		SMALL E	ENTITY	OR		R THAN ENTITY
AMENDMENT A		REMA AF	IMS INING IER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))		0	Minus	"a()	=	]/	***		OR	x s =	
	Independent (37 CFR 1,16(b))		4	Minus	3	- /		7×5 CX =		OR OR	x s=	à 80,
ব	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+s =		OR	+s .=	
							•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Colur	nn 1)	-	(Column 2)	(Column 3)				*		
AMENDMENT B		REMA AF	IMS INING ER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•		Minus	••	=		x \$ =	1,50	OR	;;; XS =	,,,,
	Independent (37 CFR 1:16(b))	•		Minus	***	=	ĺ	x s =		i		
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								<del>                                     </del>	OR	X \$=	· · ·
The state of the s							j	TOTAL	<u> </u>	OR	TOTAL	
	•							ADD'L FEE	L	OR	ADD'L FEE	
(Column 1) (Column 2) (Column 3)										_		
AMENDMENT C		REMA AF	AMS AINING TER OMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))		-	Minus	••	=		x \$ =		OR	x s =	
	Independent (37 CFR 1.16(b))	•		Minus	•••	=	1	x s=		OR	x s =	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+s =		1		
										OR	TOTAL	
				y in column 2, wh	ADD'L FEE	L	OR	ADD'L FEE				
ı '	∵ ii the "Highest	Mamper	reviously	y raid for	" IN THIS SPACE	is 1855 than 20	, en	Rer "20".				

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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